

HEALTHIER CUDAHY 2010: A Community Health Plan





To the Citizens of Cudahy:

The Cudahy Health Department's primary mission is the health of the City and its residents. This is accomplished through comprehensive programming that involves assessment, education and policy development and assurance.

Healthier Cudahy 2010 is the result of an analysis of the health concerns and needs in Cudahy. This process involved collecting and analyzing health data; identifying and prioritizing health problems and developing a health plan. The Cudahy Health Department partnered with Aurora Health Care to conduct the survey which was completed in 2003 at no cost to Cudahy tax payers.

The results of the Cudahy community assessment survey were compared to previous surveys that were done in 1996 and 1999. The Cudahy Health Department then attempted to identify priority health needs for 2005 – 2010 health programs. The eight most pressing health needs included: obesity, alcohol abuse, personal safety, lack of exercise, lack of health insurance, smoking, and low flu immunizations.

Utilizing senior nursing students from the University of Wisconsin-Milwaukee, four focus groups were held throughout the City. The mission of these focus groups was to prioritize the community assessment-identified health needs and to suggest ways that these needs could be met in the community.

Since this is a matter of City of Cudahy's health, the Cudahy Health Officer in conjunction with the Cudahy Board of Health will establish an Advisory Group to assist with program development and planning. Any Cudahy resident who is interested in the opportunity to make a positive change in the health of Cudahy residents is encouraged to contact either the Cudahy Health Department or any Cudahy Board of Health member.

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Public Health in Cudahy

Definition of a Public Health Department:

A Local Public Health Agency is a unit of municipal government that exists for the common good and is responsible for assuring that all members of the community are served by a broad array of services and activities that promote health and prevent illness, disease and injury. These "Essential Public Health Services" are common to all Wisconsin Communities. (see Figure 1) In addition to these services, local public health agencies also address the unique health needs of its populations.

The Cudahy Health Department serves, at various times, as a leader, convener, participant and supporter of public health prevention efforts to improve the health of the entire community.

Cudahy Health Department:

The mission of the Cudahy Health Department is "to help the citizens of our community achieve their highest level of well-being." We envision "strong families, in safe neighborhoods, with access to affordable health care." Our goal is "to prevent injury, disease and premature death through health education and the promotion of healthy lifestyles."

The Cudahy Health Department is governed by a Board of Health whose members are appointed by the Mayor. The current Board includes elected officials, an educator, a registered nurse, a childcare provider, a church deacon, a physician, a veterinarian and the Cudahy Health Officer. All members of the Board are Cudahy residents.

The Cudahy Health Officer, under statutory authority, oversees the health of the entire community and administers the activities of the Cudahy Health Department. Daily responsibilities include the enforcement of regulations and municipal ordinances, administering funds for health program, assuring

Figure 1

Essential Public Health Services:

- 1. Monitor health status to identify community health problems.
- 2. Diagnose & investigate identified health problems & health hazards in the community.
- 3. Inform, educate & empower people about health issues.
- 4. Mobilize community partnerships to identify & solve health problems.
- 5. Develop policies & plans that support individual & community health efforts.
- 6. Enforce laws & regulations that protect health & ensure safety.
- 7. Link people to needed personal services & assure the provision of health care when otherwise unavailable.
- 8. Assure a competent public health & personal health care workforce.
- 9. Assess effectiveness, accessibility & quality of personal & population-based health services.
- Research for new insights & innovative solutions to health problems.
- 11. Assure access to primary health care for all.
- 12. Foster the understanding & promotion of social & economic conditions that support health.

trained and competent workforce and promoting the spread of information as to the cause, nature and prevention of diseases and the improvement of health. In addition to the Health Officer, the Cudahy Health Department consists of three (3) FTE public health nurses, one (1) FTE grant coordinator, a 0.3 FTE registered sanitarian and one (1) FTE clerk. The Cudahy Health Officer also serves as the fiscal agent for four State block grant consortia and participates in three other block grant consortia projects.

Each Wisconsin local health department is categorized by its level of public health services. Wisconsin statute outline three levels of service that a health department can attain. Level I is the most basic and Level III is the most Complex (see figure 2). The Cudahy Health Department is currently a Level II department With plans to attain Level III status in 2005. currently, the Cudahy Health Department needs only to arrange for the provision of laboratory services.

The Cudahy Health Department with the Board of Health guidance, prepares an annual budget based on municipal tax dollars. In addition to this funding source, the Cudahy Health Department also receives block grant dollars from the Wisconsin Department of Health & Family Services. The types of projects that are Funded through block grants include:

1) Maternal & Child Health, 2) Immunization Action Project, 3) WI Childhood Lead Poisoning Prevention, 4) Prevention Health, 5) Tobacco Prevention & Control and 6) Emergency Public Health Preparedness.

Figure 2 Health Department Service Level Criteria

Level I Requirements:

Provide or arrange for the provision of:

- Public health program
- Public health nursing services
- Prevention & control of acute communicable disease
- Prevention of chronic disease & injuries
- Promotion of health
- Investigation, abatement or removal of human health hazards
- Prevention of future incidence of occupational disease, environmental disease & human health hazard

Level II Requirements:

Provide or arrange for the provision of:

- All Level I requirements
- At least 7 programs or services that address at least 5 health priorities in the current state health plan

Level III Requirements:

Provide or arrange for the provision of:

- All Level I requirements
- At least 14 programs or services that address at least 7 health priorities in the current state health plan
- Conduct inspections & investigations, issue permits & enforce environmental sanitation rules
- Regulate tattoo & body piercing establishments
- Conduct an environmental health program
- Public health laboratory services

Community Health Assessment

Healthier Cudahy 2010 is the strategic next step in the community health assessment and planning process. By State Statute, local health departments are required to conduct a routine community assessment to determine local strengths and needs in order to create a structure for a community health plan.

The Cudahy Health Department in partnership with Aurora Health Care, conducted a community health survey to learn about the general health and health-related lifestyles of Cudahy residents. This assessment was designed with the following objectives:

- Gather data on behavioral and lifestyle habits of the adult population.
- Gather data on the prevalence of risk factors and disease conditions of the adult population.

• Compare Cudahy health data with other local, state and regional measurements when possible.

Data collection was conducted by Management Decisions Incorporated and data analysis was completed by JKV Research, LLC. 400 randomly selected Cudahy residents were contacted by telephone for an 18 minute survey. The margin of error was $\pm 5\%$. For further details regarding the survey or its findings, either check the Cudahy website's section for the Health Department or contact the Cudahy Health Department directly.

Key findings from the community health assessment are found in Tables 1 and 2. Table 1 presents the demographic profile of respondents. Table 2 presents the health behavior data, lifestyle habits and the presence of risk factors and disease conditions of Cudahy residents.

When viewing this data, each percentage point represents approximately 100 adults. So when 13% of the respondents reported that their health was fair or poor, this roughly equates to 1,300 residents ±500. If a respondent was asked questions regarding their household, each percentage point represents approximately 80 households. For example, 13% of respondents or 1,040 households reported that someone in their household had no health insurance.

Table 1:	
Demographic Variables of Resp	ondents
Survey	y Results
Gender	
Male	45%
Female	55%
Age	
18-34	25%
35-44	24%
45-54	18%
55-64	13%
65+	20%
Education	
High School Graduate or less	43%
Some Post High School	31%
College Graduate	26%
oonege or accur.	2070
Household Income	
\$30,000 or less	25%
\$30,000 - \$60,000	48%
\$60,001 or more	21%
Not sure	5%
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Married	62%
Married	02 /6

Table 2
Behavioral Data, Lifestyle Habits & Presence of Risk Factors & Disease Conditions in Cudahy Adults

Overall Health:	Overall Health: Risk Conditions in the Pa		ars:
Excellent	22%	High Blood Pressure*	24%
Very Good	34%	High Blood Cholesterol*	20%
Good	32%	Asthma	11%
Fair or Poor	13%	Heart Disease/Condition	10%
		Diabetes	6%
Health Care Coverage:			
Personally Not Covered	6%	Moderate Physical Activity/Week:	
Household Member		Inactive*	27%
Not Covered in 2003	13%	Insufficient*	47%
Household Member		Recommended*	26%
Not Covered in 2002	15%		
		Nutrition & Diet:	
Advanced Care Plan*:		Fruit	
Yes	27%	(2 or more servings/day)	67%
		Vegetable	
		(3 or more servings/day)	33%
Routine Checkups:		Fried/Fast Foods	
Routine Physicals (2 yrs or less)	83%	(a few times/wk)	44%
Cholesterol Test (2yrs or less)	73%	Overweight	65%
Dental Checkup (past year)	63%		
Eye Exam (2 yrs or less)	83%		
		Woman's Health:	
		Mammogram	
Vaccinations:		(50+; past year)	69%
Flu shot (past year)	34%	Pap Smear (past year)	66%
Pneumonia (ever)	61%		
		Reduce Risk of Skin Cancer:	
Alternative Treatment in Past 3	Years:	Avoid artificial sources of	
Chiropractor	15%	UV Light	68%
Massage Therapy	12%	Sunscreen with SPF 15 +	56%
Meditation	7%	Sun Protective Clothing	53%
Movement Therapy	6%	Avoid Sun Between	
Aroma Therapy	5%	10AM and 4 PM	46%
Acupuncture	2%		

Men's Health:		Alcohol Use:	
Digital Exam* in Past Year		Drink in the Past Month	59%
40-49 Years Old	11%	3+ Drinks on Occasion	
50 Years +	45%	in Last Month	29%
		Binge In Past Month	21%
Other Tests:		(5+ Drinks/Male; 4+ Drinks/Females)	
Blood Stool Test		Drink or Ride When Driver Had Too Much	
(50+yrs; within past 2 years)	54%	to Drink in Past Month	2%
Sigmoidoscopy/Colonoscopy			
(50+yrs; within past 2 years)	39%	Mental Health Status:	
		Felt Sad, Blue or Depressed in	
Safety:		Past 30 Days:	
Wear Seat Belt Always		Always	5%
Adult	84%	Never	32%
Children	93%	Managing Stress:	
Wear Bicycle Helmet Always		Excellent/Good	80%
Adult	20%	Poor	5%
Children	68%	Find Purpose in Life:	
Detectors:		Never	5%
Smoke Detectors	55%	Considered Suicide	3%
Carbon Monoxide Detectors	<1%		
Both	43%	Firearms in Household:	
Neither	2%	Have a Firearm	28%
		Have a Loaded Firearm	2%
Tobacco Use:		Have a Loaded, Unlocked Firearm	<1%
Current Smokers	25%		
Quit Smoking 1 Day or More	57%	Personal Safety:	
Advised by Health Care		Afraid for Their Safety	5%
Provider	51%	Pushed/Kicked/Slapped/Hit	4%
Smoke Free Restaurant Prefere	nce:	Additional Questions:	
Smoke Free	59%	Did Not Receive Needed	
Allow Smoking	15%	Health Care	7%
No Preference	26%	Someone in Household Did Not	
140 11 G/G/ G/ICC	2070	Take Prescribed Medicine	
Ordinance Prohibiting Smoking in	n	Because of Cost	8%
Eating Establishments:	•	No Access to Adequate/	
Moderately Favor	21%	Appropriate Food in Last	
Strongly Favor	37%	30 Days	3%
2 3.1g./ 1 a. 0.	30		

^{*} For specific definitions of the terms used in the survey, see the Cudahy Health Department on the Cudahy website or contact the Cudahy Health Department directly.

City of Cudahy Involvement in Health Plan

After reviewing the results of the Cudahy Community Assessment, the Cudahy Health Officer decided to have the community at large rank some of the identified health deficits. During the fall of 2004, three senior nursing students from the University of Wisconsin-Milwaukee spent a semester at the Cudahy Health Department learning about public health. The Health Officer requested that they lead focus groups throughout the City to engage residents in the formation of this Health Plan.

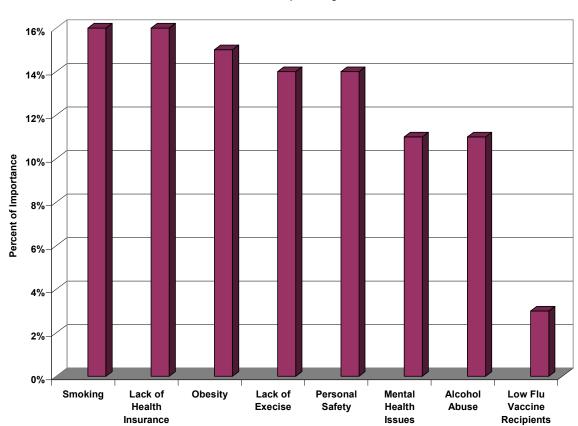
Four separate focus groups were held that semester. They included community members at the Cudahy Family Library, senior citizens at Evergreen Apartments, Department of Public Works employees at the Cudahy Health Department and 11^{th} and 12^{th} grade students at the Cudahy High School.

The nursing students were charged with the task of having residents rank eight of the most glaring health deficiencies from the Community Assessment:

Obesity
Personal Safety
Lack of Health Insurance
Mental Health Issues

Alcohol Abuse Low Flu Vaccine Turnout Lack of Exercise Smoking

Focus Group Rankings



In selecting which health priorities to focus on for the next five (5) years of health programming, the Cudahy Health Department needed to consider statutory requirements, the community's identification of health needs, the community health assessment and recommendations for best public health practices. The Cudahy Health Department reviewed the *Healthiest Wisconsin 2010* as well as *Healthy People 2010* in an effort to align health strategies when appropriate.

The Cudahy Health Department will be addressing four primary priorities on which to focus Department efforts for 2006-2010. In addition, four other secondary priorities will be addressed throughout the next five years.

Cudahy Primary Health Priorities:

- Tobacco Prevention & Control
- Access to Health Care
- Nutrition & Healthy Eating
- Physical Activity

Cudahy Secondary Health Priorities:

- Personal Safety
- Mental Health
- Alcohol Usage & Binge Drinking
- Improved Adult Immunization Rates

Other action steps will be integrated into the Cudahy general public health programming. These steps include:

- Assure a Competent Workforce
- Strengthen Collaborative Partnerships
- Improve Marketing and Communication
- Address Special Populations
- Encourage Community Input and Participation
- Continue Assessment, Monitoring and Evaluation of Programming

Tobacco Prevention & Control

Definition:

Tobacco use and exposure is the active or passive introduction into the human body of toxins found in tobacco products. Tobacco use and exposure is a complex web of social influences, physiological addiction and marketing and promotion of tobacco products.

The Cudahy Health Department has been actively involved with the South Shore Tobacco Coalition since 2001. This Coalition consists of members from Cudahy, Oak Creek, South Milwaukee and St. Francis with Coalition activities being funded through a State of Wisconsin Block Grant with additional support from St. Luke's South Shore. The Coalition has as its Mission Statement that "The Cudahy, Oak Creek, South Milwaukee and St. Francis communities collaborate to obtain data about youth tobacco perceptions and use, educate citizens about hazards of tobacco use and second hand smoke and promote awareness of cessation resources."

In 2003, 25% of Cudahy adults (3,547 adults) admitted to smoking. This figure has only decreased slightly since the 1995 Community Health Assessment. 57% of adult Cudahy smokers have tried to quit for one day or longer. 51% of Cudahy adult smokers were advised by a health professional to quit smoking. 20% (2,839) of Cudahy adult smokers smoke in a home or in a car when others are present. More than half of Cudahy adults indicated that they prefer to eat in a smoke free restaurant and would moderately to strongly favor an ordinance that would prohibit smoking in eating establishments.

Healthier Cudahy 2010 Goals & Key Action Steps:

1. Increase the circulation of information regarding the dangers of second-hand smoke.

- Work with restaurants and worksites to become smoke-free.
- Educate Cudahy residents about the dangers of second-hand smoke through mailings, newsletters, festival booths, poster campaigns and use of the South Shore Tobacco Free Coalition website.
- Educate community leaders about the danger of second-hand smoke.
- Build community grass roots support for action to reduce smoking in worksites.
- By 2007, present to the Cudahy Common Council a smoke-free worksite ordinance.
- 2. Develop a comprehensive public education plan addressing the dangers of second-hand smoke and cessation resources.

Action Steps:

- Determine the best way to educate Cudahy residents.
- Develop and implement a media campaign to reach all residents about the dangers of second-hand smoke.
- Saturate the City with educational materials regarding the dangers of second-hand smoke.
- 3. Reduce youth tobacco use by 10% within the City of Cudahy.

- Continue to support the TATU (Teens Against Tobacco Use) program at the Cudahy High School.
- Share cessation resources within Cudahy public and private schools.
- Mobilize youth to educate their peers about the dangers of smoking and second-hand smoke.

Access to Primary & Preventive Health Services

Definition:

Access means that primary and preventive health care services are available and organized in a way that makes sense to individuals and families. Access means that people have the resources, financial and non-financial, needed to obtain and use available services.

In the 2003 Community Assessment survey, 6% or 850 Cudahy adults did not have health insurance. Almost 17% of Cudahy adults utilize walk-in clinics or hospital emergency rooms as their primary health care services. 8% of our adults could not take their medications due to prescription costs.

Healthier Cudahy 2010 Goals & Action Steps:

- 1. Improve health insurance coverage for all Cudahy residents. *Action Steps:*
 - Continue to offer Presumptive Eligibility to all qualifying pregnant females.
 - Start a campaign to educate residents about the Healthy Start health insurance for working families utilizing the media, the City newsletter and school newsletters.
 - Work with the Packard Avenue Community Clinic and St. Luke's South Shore to offer information on government health insurance programs as well as prescription drug programs through various drug companies.
 - Identify other barriers to health care including language, culture, religious differences as well as concerns about confidentiality or discrimination.

Adequate and Appropriate Nutrition

Definition:

Adequate and appropriate nutrition has two dimensions:

- 1. Adequate nutrition refers to food security. This means that residents have access at all times to nutritious and safe foods. This also means that residents get their food through regular sources and not through emergency coping strategies such as food pantries.
- 2. Appropriate nutrition refers to foods that promote overall good health.

According to the 2003 Cudahy Community Assessment survey, 3% (over 400) of our adults did not have access to adequate food in the past 30 days. This survey also demonstrated that 65% of Cudahy adults are overweight (have a BMI of 25 or greater) and 26% of Cudahy adults are obese (have a BMI of 30 or greater). 44% of our adults eat at fast food restaurants either daily or several times a week.

The Cudahy Health Department recommends:

- Eating 5-9 servings of fruit and vegetables each day.
- Eating a variety of foods.
- Watching portion sizes of all foods.
- Breast-feeding infants exclusively for the first six months of life.
- Decreasing the amount of fat and sugar in a daily diet.
- Decreasing the amount of fast foods in a daily diet.

Healthier Cudahy 2010 Goals & Action Steps:

Improve the eating habits of Cudahy residents.

Action Steps:

- Explore research-based nutrition programs to incorporate into community nutrition efforts.
- Develop a media campaign to urge good eating habits.
- Begin a dialog with the Cudahy School District to improve nutrition in each of the school lunch programs.
- Begin to talk with local restaurant owners to offer healthier menu options within their establishments.
- Continue to urge pregnant clients to breast-feed their infants.

Attempt to resolve inadequate food security in the City.

- 1. Market the use of the Cudahy WIC site for eligible Cudahy families.
- 2. Consider having the Health Department assume the management of the WIC program in Cudahy.

Lack of Physical Activity

Definition:

According to the National Athletic Trainer's Association, physical activity consists of athletic, recreational or occupational activities that require physical skills and utilize strength, power, endurance, speed, flexibility, range of motion or agility.

The Centers for Disease Control and Prevention recommends either of the following activity levels for adults:

- Moderate physical activity for at least 30 minutes on five or more days of the week.
 This could include walking briskly, mowing the lawn, vacuuming, gardening, dancing, swimming or bicycling on level terrain. A person should feel some exertion but should be able to carry on a conversation comfortably during the activity.
- Vigorous physical activity for 20 minutes on three or more days per week. This could include jogging, chopping wood, participating in high-impact aerobic dancing, swimming continuous laps or bicycling uphill. A person should feel a significant increase in heart and breathing rates.

27% of the respondents to the 2003 Cudahy Community Assessment Survey indicated that they were inactive with another 47% indicating that they had insufficient activity levels.

Healthier Cudahy 2010 Goals & Action Steps:

1. Improve the activity levels of all Cudahy residents.

- Explore new programs and methods for increasing physical activity such as encouraging residents to begin to walk more within the community.
- Increase awareness about the benefits of physical activity and how to fit it into everyday lifestyles.
- Talk with the school district, St. Luke's South Shore and local health clubs to promote walking and other forms of exercise.
- Work with the School District to identify ways that school children can become more active.
- Encourage the Walk Your Child to School Promotion at all elementary schools.
- Work with the County Park System and the Cudahy Police Department to assure that all bicycle/walking paths by the lake are safe for resident use.

Secondary Health Priorities

The Cudahy Health Department identified four other secondary priorities for 2010. These issues are also important to the health of the City. The Health Department will also provide education and some programming for these areas as well as strengthening partnerships to address these issues.

Personal Safety

Injury is defined as "any unintentional or intentional damage to the body resulting from acute exposure to thermal, mechanical, electrical or chemical energy or from the absence of such essentials as heat or oxygen." There are two classifications of injuries:

- 1. Unintentional such as falls, burns, motor vehicle crashes, poisonings and drowning.
- 2. Intentional such as suicide, homicide and assaults such as sexual assault, intimate partner violence, child and elder abuse.

In the 2003 Cudahy Community Assessment Survey, only 84% of adults said that they always buckle their seat belts when in a car, only 91% of children are buckled into a child passenger safety seat and only 20% of children who bicycle, use in-line skates or scooters wear a bicycle helmet. In that same survey, 5% of Cudahy adults indicated that someone made them feel afraid for their safety. 4% of Cudahy adults said that someone kicked, hit or otherwise hurt them.

Mental Health

Mental Health is a state of successful performance of mental functions, resulting in productive activities, fulfilling relationships with other people and the ability to adapt to change and cope with adversity. Mental health is indispensable to personal well being, family and interpersonal relationships and meaningful contribution to community and society.

In the 2003 Cudahy Community Health Assessment Survey, 23% of respondents indicated that they felt sad, blue or depressed. 20% felt that they were doing a poor to far job of managing stress. 3% of Cudahy adults admitted to being so overwhelmed that they considered suicide.

Alcohol Use & Binge Drinking

Alcohol abuse is associated with motor vehicle crashes, homicides, suicides and drowning which reflect the leading causes of death among youth. Long-term drinking can lead to heart disease, cancer, alcohol-related liver disease and pancreatitis. Alcohol use during pregnancy can lead to fetal alcohol syndrome, a leading cause of preventable mental retardation. Binge drinking is defined as having 5 or more drinks for males and 4 or more drinks for females at one time. This new definition from the CDC is based on weight and metabolism differences between the sexes.

In the 2003 Cudahy Community Health Assessment Survey, 21% of all respondents binged in the previous month. Generally, respondents who were 18-34 years old or 45-

54 years old, male or those with a household income of at least \$60,000 were more likely to report having had three or more drinks on more occasions or binged at least once in the past month.

Existing, Emerging & Re-emerging Communicable Diseases

Emerging communicable disease may result from changes in or evolution of existing organisms or diseases that are known to occur in one setting may spread to a new geographic area or to human populations. During the past 30 years, at least 30 new viral, bacterial and parasitic diseases have been classified as "emerging" – either newly identified or suddenly increasing in incidence (Institute of Medicine, 1992). Pandemic influenza is an example of emerging and re-emerging diseases. The 1918, 1957 and 1968 influenza pandemics killed 90,000 people in the United States (Meltzer, Cox & Fukuda, 1999).

The 2003 Cudahy Community Assessment Survey demonstrated that only 70% of residents aged 65 years and older and only 34% of those 18 years and older received a flu shot in the previous year. The Survey was done prior to the flu shortage of 2004. Healthy People 2010 has a goal that 90% of people aged 65+ get a flu shot in the previous year.

Implementation

The Cudahy Health Department will take a leadership role in coordinating and implementing the *Healthier Cudahy 2010* health plan through the development of health policies, procedures and programs for the City, advocating for best practice public health services and assuring access to these services for City residents.

The Cudahy Health Department in conjunction with the Cudahy Board of Health will create an advisory committee to assure that *Healthier Cudahy 2010* is truly a community effort. The Health Department will seek participation from health organizations, community groups and businesses, health professionals and residents. This Advisory Committee will be charged to meet quarterly to:

- 1. Oversee Healthier Cudahy 2010 planning and implementation
- 2. Discuss health priorities
- 3. Advise on policy development
- 4. Review health data and program evaluation
- 5. Monitor Healthier Cudahy 2010.

During the spring of 2005, the Cudahy Health Department will seek community input on the strategic plan, revise the plan as necessary and obtain approval from the Board of Health. During the fall of 2005, the Health Department will establish the *Healthier Cudahy 2010* Advisory Committee, further develop and strengthen community partnerships, provide appropriate training for Department staff and explore best practice public health programs and policies to model.